



Response Under 37 C.F.R. § 1.116
Group Art Unit 1765, Expedited Procedure

#20/f
(102)
4a
1/24/02

03560.002127

PATENT APPLICATION

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of:)
TOSHIO ICHIZAKI) Examiner: M.A. Anderson
Application No.: 09/048,795) Group Art Unit: 1765
Filed: March 27, 1998)
For: PRODUCTION APPARATUS AND)
METHOD FOR MAKING FLUORIDE)
CRYSTAL AND CRUCIBLE FOR USE)
IN THAT METHOD) January 16, 2002

Commissioner for Patents
BOX AF
Washington, D.C. 20231

RECEIVED
JAN 23 2002
TC 1700

AMENDMENT AFTER FINAL REJECTION
AND PETITION FOR EXTENSION OF TIME

Sir:

Applicant petitions to extend the time for response to the Office Action dated September 19, 2001 to and including January 19, 2002. A check in the amount of \$110.00 for payment of the extension fee is enclosed. Please charge any additional fee required for the extension, and credit any overpayment, to Deposit Account 06-1205. The Examiner is respectfully requested to amend the above-identified application as follows:

01/16/2002 CCHAUI 00000088 09048795

01 FC:115

110.00 DP



In re Application of:

TOSHIO ICHIZAKI

Application No.: 09/048,795

Filed: March 27, 1998

For: PRODUCTION APPARATUS AND
METHOD FOR MAKING FLUORIDE
CRYSTAL AND CRUCIBLE FOR USE
IN THAT METHOD

Docket No. 03560.002127

Examiner: M.A. Anderson

Group Art Unit: 1765

Date: January 16, 2002

THE COMMISSIONER FOR PATENTS
Washington, D.C. 20231

RECEIVED
JAN 23 2002
TC 1700

Sir:

Transmitted herewith is an Amendment After Final Rejection And Petition For Extension Of Time in the above-identified application.

☒ No additional fee is required.

The fee has been calculated as shown below

CLAIMS AS AMENDED						
	(2) CLAIMS REMAINING AFTER AMENDMENT		(4) HIGHEST NO. PREVIOUSLY PAID FOR	(5) PRESENT EXTRA	RATE	ADDITIONAL FEE
TOTAL CLAIMS	* 8	MINUS	** 20	= 0	x \$9 \$18	\$ -0-
INDEP. CLAIMS	* 1	MINUS	*** 3	= 0	x \$42 \$84	\$ -0-
Fee for Multiple Dependent claims \$140°/\$280						\$ -0-
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT---						\$ -0-

* If the entry in Column 2 is less than the entry in Column 4, write "0" in Column 5.

** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, write "20" in this space.

*** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, write "3" in this space.

☐ °Verified Statement claiming small entity status is enclosed, if not filed previously.

☐ A check in the amount of \$_____ is enclosed.

☐ Charge \$_____ to Deposit Account No. 06-1205. A duplicate copy of this sheet is enclosed.

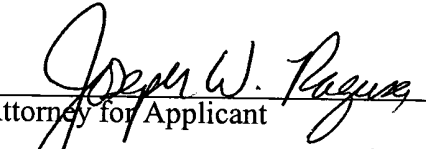
☒ Any prior general authorization to charge an issue fee under 37 C.F.R. 1.18 to Deposit Account No. 06-1205 is hereby revoked. The Commissioner is hereby authorized to charge any additional fees under 37 C.F.R. 1.16 and 1.17 which may be required during the entire pendency of this application, or to credit any overpayment, to Deposit Account No. 06-1205. A duplicate copy of this paper is enclosed.

☒ A check in the amount of \$110.00 to cover the fee for a one-month extension is enclosed.

☐ A check in the amount of \$_____ to cover the Information Disclosure Statement fee is enclosed.

☒ Applicant's undersigned attorney may be reached in our New York office by telephone at (212) 218-2100. All correspondence should continue to be directed to our address given below.

Respectfully submitted,



Attorney for Applicant
Registration No. 38,586

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30 Rockefeller Plaza
New York, New York 10112-3801
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